

County: Shawano
MAPLE LANE HEALTH CARE CENTER

Facility ID: 5350

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N4231 STATE HIGHWAY 22
SHAWANO 54166

Phone: (715) 526-3158

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/00): 78

Total Licensed Bed Capacity (12/31/00): 78

Number of Residents on 12/31/00: 72

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Average Daily Census:

County

Skilled

No

No

67

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	26.4
Supp. Home Care-Personal Care	No					1 - 4 Years	33.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	11.1	More Than 4 Years	40.3
Day Services	No	Mental Illness (Org./Psy)	54.2	65 - 74	12.5		
Respite Care	No	Mental Illness (Other)	36.1	75 - 84	43.1		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	30.6	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	2.8	Full-Time Equivalent	
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Residents	
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/00)	
Other Meals	No	Cardiovascular	2.8	65 & Over	88.9		
Transportation	No	Cerebrovascular	1.4			RNs	8.6
Referral Service	No	Diabetes	0.0	Sex	%	LPNs	7.1
Other Services	No	Respiratory	0.0			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	5.6	Male	27.8	Aides & Orderlies	
Mentally Ill	No			Female	72.2		34.2
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other			Private Pay		Managed Care			Total	Percent Of All Residents	
	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%			Per Diem Rate
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	0	0.0	\$0.00	60	92.3	\$94.43	0	0.0	\$0.00	7	100.0	\$110.00	0	0.0	\$0.00	67	93.1%
Intermediate	---	---	---	5	7.7	\$78.39	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	5	6.9%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	0	0.0		65	100.0		0	0.0		7	100.0		0	0.0		72	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Percent Admissions from:						
Private Home/No Home Health	8.7	Bathing	12.5	55.6	31.9	72
Private Home/With Home Health	4.3	Dressing	22.2	54.2	23.6	72
Other Nursing Homes	47.8	Transferring	51.4	36.1	12.5	72
Acute Care Hospitals	17.4	Toilet Use	34.7	38.9	26.4	72
Psych. Hosp. -MR/DD Facilities	4.3	Eating	75.0	13.9	11.1	72
Rehabilitation Hospitals	0.0	*****				
Other Locations	17.4	Continence		%	Special Treatments	%
Total Number of Admissions	23	Indwelling Or External Catheter	1.4		Receiving Respiratory Care	2.8
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	59.7		Receiving Tracheostomy Care	0.0
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bowel	30.6		Receiving Suctioning	0.0
Private Home/With Home Health	6.3	Mobility			Receiving Ostomy Care	1.4
Other Nursing Homes	6.3	Physically Restrained	29.2		Receiving Tube Feeding	1.4
Acute Care Hospitals	0.0				Receiving Mechanically Altered Diets	54.2
Psych. Hosp. -MR/DD Facilities	0.0	Skin Care			Other Resident Characteristics	
Rehabilitation Hospitals	0.0	With Pressure Sores	1.4		Have Advance Directives	56.9
Other Locations	0.0	With Rashes	1.4		Medications	
Deaths	87.5				Receiving Psychoactive Drugs	84.7
Total Number of Discharges (Including Deaths)	16				*****	

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	Ownership: Government			Bed Size: 50-99		Licensure: Skilled		All Facilities	
	This Facility	Peer Group	Ratio	Peer Group	Ratio	Peer Group	Ratio	Peer Group	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	85.9	87.0	0.99	85.4	1.01	84.1	1.02	84.5	1.02
Current Residents from In-County	65.3	75.8	0.86	72.9	0.90	76.2	0.86	77.5	0.84
Admissions from In-County, Still Residing	52.2	28.9	1.81	21.3	2.44	22.2	2.35	21.5	2.43
Admissions/Average Daily Census	34.3	81.9	0.42	101.3	0.34	112.3	0.31	124.3	0.28
Discharges/Average Daily Census	23.9	83.2	0.29	101.3	0.24	112.8	0.21	126.1	0.19
Discharges To Private Residence/Average Daily Census	1.5	32.1	0.05	37.6	0.04	44.1	0.03	49.9	0.03
Residents Receiving Skilled Care	93.1	88.8	1.05	89.6	1.04	89.6	1.04	83.3	1.12
Residents Aged 65 and Older	88.9	89.7	0.99	93.4	0.95	94.3	0.94	87.7	1.01
Title 19 (Medicaid) Funded Residents	90.3	69.4	1.30	69.0	1.31	70.1	1.29	69.0	1.31
Private Pay Funded Residents	9.7	20.1	0.48	23.2	0.42	21.4	0.46	22.6	0.43
Developmentally Disabled Residents	0.0	0.8	0.00	0.9	0.00	0.9	0.00	7.6	0.00
Mentally Ill Residents	90.3	47.5	1.90	41.5	2.18	39.6	2.28	33.3	2.71
General Medical Service Residents	5.6	15.2	0.36	15.4	0.36	17.0	0.33	18.4	0.30
Impaired ADL (Mean)	41.1	50.7	0.81	47.7	0.86	48.2	0.85	49.4	0.83
Psychological Problems	84.7	58.0	1.46	51.3	1.65	50.8	1.67	50.1	1.69
Nursing Care Required (Mean)	7.8	6.9	1.13	6.9	1.13	6.7	1.16	7.2	1.09